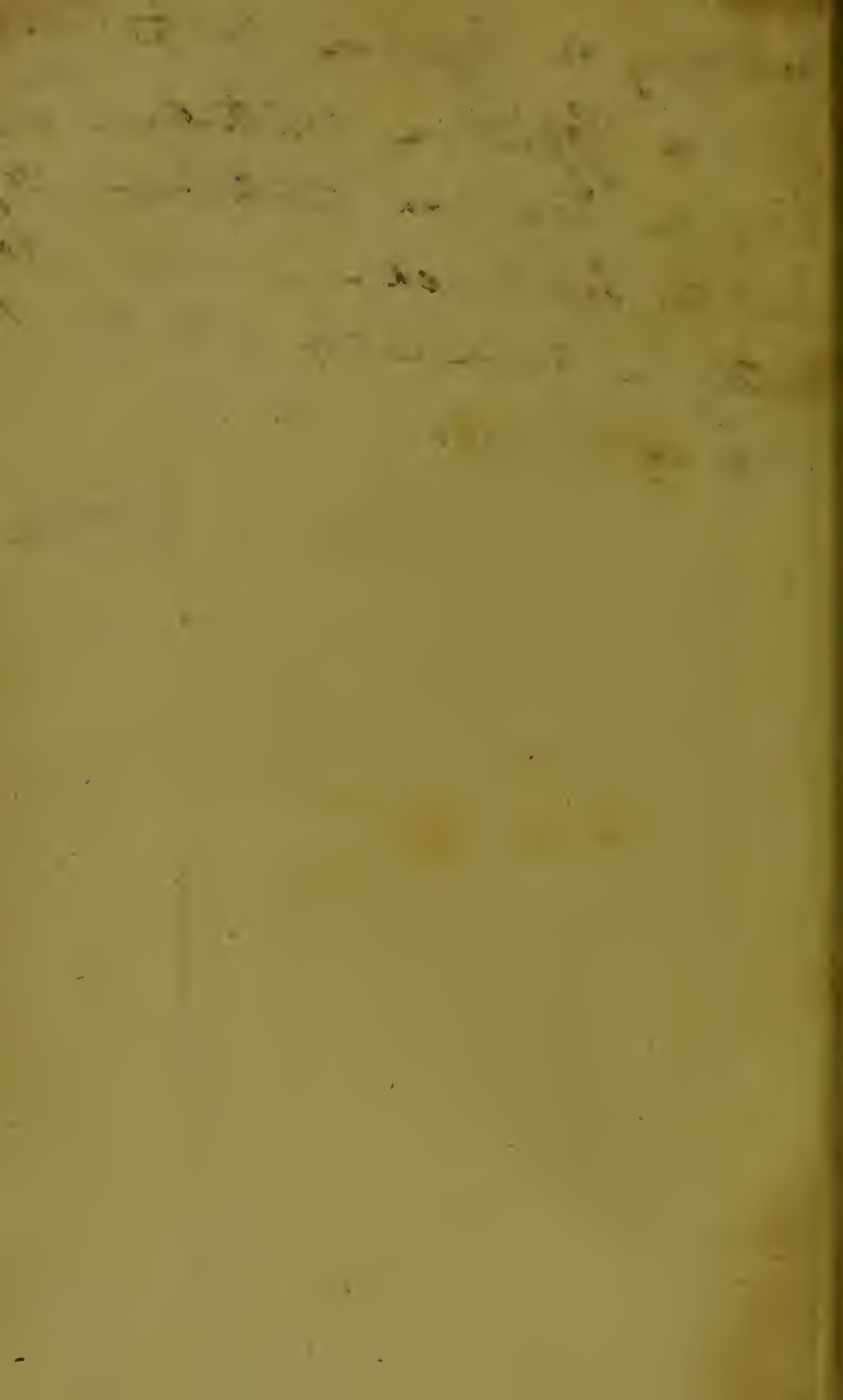


Trichomy on Egyptian Ophthalmia 1802
Lam on Egyptian Ophthalmia - 1803
Lam on Egyptian Ophthalmia - 1807
Lam on Egyptian Ophthalmia - 1800
Lam on Inflammation of the Eye 1802
Lam on Diseases of the Eye - 1802

John L. Loder



OBSERVATIONS

ON THE

Acute Disease of Egypt,

CALLED THE

OPHTHALMIA.

BY F. B. SPILSBURY,

LATE

Surgeon to the Hospital at BARUTE, for the Reception of Wounded
during the Siege of ACRE; to the Flotilla of Gun-Boats
captured by LA TIGRE: to the Brigade of Seamen
serving on Shore in EGYPT under the
Command of Sir W. S. SMITH,
and Surgeon to H. M. Sloop
BULL-DOG.

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1802.

[Price 2s



TO

SIR W. SIDNEY SMITH, Kt. &c.

SIR,

WHEN, candidly, I acknowledge that sympathy for the afflicted, has been the chief motive of the following Observations, no apology, I presume, will be necessary for offering them to the Public, however rude and undigested they may appear; or for inscribing them to YOU, whose
humanity

humanity on the occasion has been so conspicuous. Believe me, Sir, I rejoice in the opportunity of publicly expressing my admiration of that fellow-feeling, of which I had ocular demonstration; that fellow-feeling, not only for those who had the honour of serving under you, but which was liberally extended to all surrounding objects of every denomination, who, from your voluntary compassion, and personal assistance, have frequently derived that inestimable blessing, the restoration of health. It is this which characterizes the HERO — it is this which renders

renders his fame immortal ; he lives for ever in the hearts of those, who might otherwise have been destitute widows and poor orphans !

The following pages contain a brief account of, and a proposed cure for, that acute disease, the Ophthalmia, which gave us so much pain and anxiety during the time we were in Egypt.

Happy I shall be should this brief account lead the way for a more copious detail. Should this my feeble

ble

ble attempt encourage others of greater ability to pursue the theme, particularly of those who have had more experience than could possibly be derived from a brigade of only 350 men; but small as the number was, to your marked attention, Sir, we are considerably indebted for its not being reduced; particularly to your kind consideration in procuring for us the healthful situation of ROSETTA; and as probably it may be a satisfaction to some of my readers, I have subjoined a table of the whole who were with me at

RO-

ROSETTA, which being compared with the Lines before ALEXANDRIA, the contrast must appear great, particularly in the disease now under consideration.

This work, I am conscious, from the nature of the subject, might have been considerably enlarged, but I was apprehensive that *Diffusion*, by increasing the expence, might baffle its UTILITY; which being the grand design, will, I trust, cover all defects, and recommend it to YOUR kind approbation, which will not only ensure its success, but will be

a PUBLIC addition to the many
PRIVATE favours already conferred
upon,

SIR,

Your much Obligated,

And most humble Servant,

F. B. SPILSBURY.

OBSERVATIONS

OBSERVATIONS

ON THE

ORIGIN AND CURE OF THE

Ophthalmia of Egypt.

NO Disease has been found more fatal to our army, than Inflammations of the Eyes. Its sudden attack, the danger of Vision, and the temporary loss of effective men, have created much apprehension. At first they were deprived of Sight in the night only, without any apparent defect;—but the disease soon brought on more formidable symptoms.

The length of time I was in the Mediterranean, (before we landed in Egypt) I was continually observing the weakness and blindness* of the Inhabitants of the Islands and the coasts adjacent, but always found the appearance encrease as we drew nearer the Nile. Some totally blind, others one

* First I supposed this to arise from the custom of colouring their eyes black with powdered antimony or black lead, which they introduce under the lids by a silver bodkin.

Eye or both dim or opaque ; several with specks on the transparent cornea, or distortions of the Iris, obliging them to look close to any object, or sideways, most of them having Seatons in their necks, or Iffues* of which they are extremely fond, and and there are very few but what have these marks on them.—Yet I could not trace the origin until we became subject to its ravages.

It is a melancholy sight to walk through any of their Towns to see such a number of blind beggars†, the shopkeepers holding their faces close to the

* I cannot pass this subject, without describing the cruel manner of forming it, nor do they think it has so good an effect when performed with a lancet. After marking the spot with ink, they place a small portion of burning fungus on the part, and patiently wait till it is burnt out, which they again renew until the parts are sufficiently destroyed to form it, and when this slough is out, they apply the pea.

† There must be a distinction between those who lose their Eyes by this disease, and those who have them put out under the name of punishment ; I am sorry to say, this is no uncommon thing, and is frequently used by Gezar Pasha. When they are condemned to lose one or both, they are taken to one of their barbers (who are their surgeons), thrown on their backs, and held down until a razor is drawn across them, immediately discharging their humours, or sometimes the whole Eye is scooped out ; so frequently has the wretch ordered this cruel act, that it became proverbial, when we saw a man without an Eye, to say, *He has been at Acre.*

objects,

objects, or carefully feeling their money : it spares neither age nor sex, attacking them indiscriminately, until, by repeated assaults, it leaves the poor wretch in utter darkness.

At Rosetta, every corpse is carried to the grave by a set of blind people, leading each other, chanting passages of the Alcoran, for a small pittance, until death relieves them. Worthy of imitation are the sons of Olman : for those who will work, are always employed in pounding coffee, blowing blacksmiths' bellows, &c.

The common Ophthalmia of Authors, comes far short of this which is deservedly called the Egyptian*, and as I before mentioned, the sudden attack, and the number rendered unfit for immediate service, occasioned general alarm, and sufficiently employed the thoughts of the Medical Gentlemen.

As to its cure, there were various opinions : some supposing it infectious, others from the intense heat of the sun by its vivid reflection from the sands ; others, from the small particles of sand continually irritating the coats of this tender and invaluable organ ; and lastly, by the intense heat of the day, and

* I have seen it at Cyprus, Barute, Acre, Jaffa, &c. but it is mild to that of Egypt.

heavy cold dews at night. This I shall endeavour to explain in as clear and concise a manner as the subject will possibly admit of.

It was on the memorable 8th of March, 1801, the English army* landed at Aboukir under a heavy fire of artillery, and in a very few days many lost their vision, especially after sun set. The Ophthalmia appeared about the beginning of April, and decreased towards the latter end of July; some few were affected after this period, but in a trifling manner to what it was before. From the rapid encrease of the sick list, some, as I before mentioned, thought it was contagious, as it frequently happened when one in a tent was affected, others soon followed; much also may be said from the extreme heat and vivid reflection, for it must be considered, that Alexandria is in Lat. 31-11 N. a dreary waste, no shelter from the scorching beams, one continued desert of sand, whose particles are so light, that the least Zephyr sets it afloat; it pervades the closest chest, or even case within case†, nor can

* There were seven ships landed each 50 sailors to drag the guns, and act as artillery men, forming a brigade under the command of Sir W. S. Smith.

† My instruments were in a mahogany case, which was put into a leather one well strap't down, and this again into a canvas one; notwithstanding the sand got into them: those who have not been here, can have no idea of the quantity of
you

you sleep in a temporary shade, but swarms of insects surround you, thrusting themselves into the inner canthus, all adding to the increased irritation, the body enervated by day, and again suddenly exposed to dews by night, is consequently capable of any impression; in June and July there is not a cloud to be seen to soften the scorching rays, or give a temporary shade to the frame, or relief to painful vision.

It was curious to hear the medical gentlemen when they met. Some would say they had tried gouldard and bleeding; some cold water and blisters; others warm baths, laudanum, &c. in short, they were all perplexed, and particularly when they themselves were affected: in this number I must include myself, which affords me an opportunity of giving a clear and concise account of the symptoms and most effectual cure.

and swallowed during meals, and which at first was apt to disgust us, but custom soon reconciled us to that as well as to the numerous swarms of flies, lice, scorpions, snakes, centripeds, tarantulas, asps, rats, &c. which were in the lines before Alexandria, adding to the above bad brackish water, (two wells only that produced any thing tolerable) is it to be wondered that disease should invade us?

SYMPTOMS.

THIS disorder first makes its appearance under the sensation of sand, having got into one or both eyes, or a smart and sudden pain in one particular spot, and upon inspection, matter is found on the inner canthus ; this continuing, the lids begin to swell, and towards the evening, all the symptoms of high inflammation are encreased, with slight fever. Sensation of burning coals between the lids, the tunica albuginea highly inflamed over the whole surface ; the patient finds it impossible to lie down, as it encreases the pain, but is obliged to be placed in an erect posture. Violent and painful spasms of all the muscles of the eyes now take place, the orbicularis contracting the lids forcibly together, excite excruciating agony all night ; in the morning, the eye-lashes are firmly glued together, while hot scalding tears are copiously secreted till they burst asunder, thus procuring a temporary relief.

Towards the dawn of day, slumber steals on the fatigued body, but this only in an erect position.

The next day, the eye-lids are so much enlarged and œdematous, that it is not possible to open them without assistance ; the eye-brows are drawn down
below

below their usual situation, and in the evening all the horrid symptoms are encreased; on opening them, they appear full of matter, and some particles are of so firm a consistence as to bear resistance between the thumb and finger. The whole of the white part has now one uniform red appearance, and in a few days fungus arises, elevating itself above the transparent cornea which now begins to be affected, becoming sensibly vascular or opaque.

It frequently happens, that in five or six days small pelucid blisters arise on the transparent cornea, which soon burst, leaving a small depression or ulcer, and sometimes spreading over great part of the sight; but there are tumours, which arise far more dangerous than what I have just mentioned; it is when the coats of the eye project like a small visicle, in which the Iris is included, giving it its own colour, and forming an *Hernia sui Generis*: this from its colour is easily known; but should it stop here, which is very seldom without operation, the Iris becomes deformed, its muscular powers lost in a great degree, but if it is left to itself, the whole gradually protrudes, till it appears one uniform mass, and vision is lost for ever.

During the high inflammatory state, it sometimes happens that the eye suddenly bursts, and the aqueous humour is thrown out with excruciating pain

to

to a great distance, leaving afterwards a cicatrice, which it is impossible to remove. In short, all the coats of this organ are so extremely tender, that the smallest force ruptures them : in some we find that the tarfi and external parts of the lids are inflamed, but this only in few cases.

How liable are these organs to be inflamed, when every gentle breeze gives the top of the hills a fuzzy appearance, their edges becoming indistinct from the small particles set afloat, and clouds of them seen at a distance like smoke, which, as before mentioned, are so fine as to pervade the closest packages, I therefore shall not hesitate to say that the

Predisposing Cause

is excess of heat and light, rendering the nerves extremely irritable, but the

Exciting Cause

is, in my opinion, small particles of sand between the eye and the lid. For a moment let us suppose one more speculated than the rest has attached itself high up on the tunica adnata, this at first (where we are so much exposed) is taken no particular notice of, except slightly rubbing the eye, and this I am apt to think, takes place some days before the real disease, though the true exciting cause. I have frequently

frequently heard them complain of (as well as felt myself) a stiffness and a sensation of sand in the eyes a few days before the disease makes its appearance; and this was eased by gentle friction, though in the end it increased the inflammation; but when a part becomes inflamed, and a small particle of corroding matter is produced, it immediately gives a smart pain, and as I before mentioned, a small portion of matter is formed in the internal canthus, so that a slight inflammation takes place before, but not to alarm, until this corrosive matter is produced, which from the time is rapidly encreasing.

I cannot lose the idea that the sand is the exciting cause, though some bring it as a proof. they have it at sea: true—and you have the same heat and reflection: the wind conveys the fine particles of sand to a great distance out of sight of land: coming near this coast, I have known it settle on the decks and on the cloaths. When it does take place at sea, which is very seldom, it is always mild; the coolness between decks, the shade, &c. is one great cause why the patient so soon recovers.

The Prognosis

is most fatal when the globe itself is inflamed, or strong spasms endanger the rupture of the eye, so are ulcers of the cornea, or where the iris is affected:

but favourable when the swelling of the lids abate, the discharge lessens, and repose at night can be obtained.

METHOD OF CURE.

IF the disease be taken in time, it is in my opinion extremely easy, especially in the first beginning, from a well-known rule in medicine, *remove the cause and the effect will cease*; therefore we cannot too soon employ every possible means of attempting the grand object for which there are two remedies, either carefully picking*, or wiping out the extraneous matter from under the lid, or with a syringe†, washing gently the whole surface, the latter gives sooner relief and is not so painful to the patient. This should be carefully done two or three times a day,

* Picking out the matter with a fine rag, has been the common mode of relief, and from under the upper eye-lids, by a fine skewer has given ease; but it is tedious and irritating, which is not the case by syringing.

† Matter secreted from an inflamed membrane, will, when applied to an healthy one, cause inflammation, and produce a diseased appearance, is well known, as in gonorrhœa, cancer, &c. Two cases have occurred since the above was written, by injecting other's eyes, (*See the Cases*) the disease was produced from the matter by accident.

with

with warm water, by which means, the small particles of sand are dislodged, as well as the corroding discharge, and as spasms take place early in the disease, warm fomentations must frequently be repeated till the muscles are relaxed. The *Prima Via* must be attended to, and in the evening, from XXX to XL drops of laudanum. The form of the bed ought to be regarded, as every symptom is increased in lying down, from too great a quantity of blood being determined to the brain and adjacent parts; therefore the head and shoulders ought to be well elevated; all light excluded, and the utmost silence kept. If from this mode of treatment the patient has rest the first night, the cure will be effected with speed and facility.

It has been invariably the custom, in the first beginning, to blister behind the ears and temples, from a well-known effect, that one inflammation will cure another; this certainly is very proper when the cause is removed, but otherwise can be of very little service. Bleeding, when the inflammation runs extremely high, is absolutely necessary: but I have known a copious evacuation taken from the arm, and yet the iris became diseased; and in another case, it brought on so great a debility, that the patient was with much difficulty restored to his former strength. Cupping would have had a good effect, but that I believe was never attempted for
want

want of instruments, and slight scarifications* on the temples had very little effect. However when the constitution is strong enough, it ought to be performed copiously, but this need not be done if the first treatment is well attended to.

As I suppose that the disease was on the 3d, 4th, or 5th day before the patient came to undergo this operation, the whole, or greater part had become vascular, the largest of the vessels coming from the internal, or external angle of the eye, should be divided by means of an armed lancet; but here you will frequently meet with great difficulty from the irritability of the parts producing spasms, which forcibly draw the eyes into the sockets, and in some cases inverting the lids; but when you do succeed, the small quantity of blood that flows, will give immediate relief, and by the next day it is very easy to perform the operation; if this should not happen, fomentations of warm water with a little

* At Rosetta I had an opportunity of seeing this operation for the eyes. In a barber's shop there sat a Turk with his turband round his neck, which he drew so tight, that the patient had much difficulty to breathe, the jugulars as well as all the veins in his face and neck compleatly tinged his countenance, highly expressive of strangulation; the operator standing before him with a razor, scarified all the forehead and temples in the following regular manner, | | | | every now and then scraping off the blood with the edge, and to encrease the bleeding, rubbed salt on them.

laudanum

laudanum must be repeatedly used, until the muscles are relaxed.

If you happen to be too late in this simple operation, red globules of blood are pushed into the transparent cornea which render it opaque, and then the cure is doubtful ; but when fungus's arise over the surface threatening to cover the pupil, the whole should be scarified, and the bleeding promoted by warm fomentations ; and when it has ceased, apply laudanum and water over the whole forehead and temples, keeping them continually moist ; for in this stage they complain of excruciating pain in those parts ; nor ought the opiate to be forgot at night : I prefer the liquid form, as it is sooner diffusible. Some prefer goulard ; I object to it, as its sedative powers are slower, and its præcipitate frequently in the eye becomes an irritating cause.

Should the inflammation still run high, a large blister or seaton must be put behind the neck ; brisk purging and pedeluvian must be attended to, as well as low diet.

In this stage great care ought to be taken to avoid any injury or blows on the eye, as the membranes at this time are easily ruptured : should this misfortune happen, immediately cover the part with a compress

prefs of laudanum and water, and if the pulse will bear it, take blood from the temporal artery, keep the patient extremely low and cool until the inflammation, caused by the accident. has abated.

When the inflammation has subsided, yet leaves an opaque spot on the transparent part of the eye, I have succeeded in removing it by throwing through a quill a small portion of calomel, two or three times a day : but no escurotic powders ought to be used until inflammation has disappeared.

Blisters, which arise on the transparent cornea, should be carefully opened ; if neglected, they burst, and become small ulcers. I have tried preparations of zinc, but not so effectually as the above.

The last I shall speak of, is where part of the transparent cornea forms a sack, in which a portion of the iris is included, giving the tumour its own colour ; when you examine the eye carefully, you find the pupil has lost its form, becoming oval, and near the tumor, the iris disappearing, this gradually encreasing until the whole is included. On consulting Mr. O'Dyer, surgeon of the 54th, it was agreed to open it in the first instance and apply calomel, and by this means, every

one recovered, though some little deformation was sometimes the consequence; but this in time gradually disappeared, leaving a small cicatrice of no consequence to vision.

Here you will meet with a strong resistance, as your lancet will have to pass through the whole of the cornea, and remember to carry it horizontally, taking care not to wound any other part but the tumor, and always make the puncture the farthest distant from the pupil, after which use the calomel. It will sometimes happen, that you may have occasion to perform this operation two or three times.

In all stages of this disease, cleanliness must be strictly attended to in every sense of the word.

*On the Debilitated State of the
Eyes when the Inflammation
has abated.*

INFLAMMATIONS arise from two causes, viz. Plethora, and Debility, which in this disease are very distinct. The high inflamed state still encreased by repeated irritation, causing the arteries forcibly to contract, pushing on the red particles of blood into the smallest capillary vessels, thereby distending them beyond their natural size, brings on debility; and they now have no power to contract or throw the particles any farther, which consequently leave the tunica albuginea highly coloured, when the vision is no longer painful. This is the debilitated state, and clearly points out a tonic plan; but as the absorption of the particles is slow, small scarifications are necessary, at the same time using the cold bath, solutions of vitriol, zinc, &c. and when from length of pain, as is frequently the case, the body is emaciated, the bark and vitriol must be regularly administered.

Where the external coats of the eye have returned to their natural colour, yet vision still tender and irritable, the greatest care should be taken not to expose them to too sudden a glare of light, or to
the

the view of distant objects, for the inflammation has not yet left the internal structure, and should this continue any length of time, a gutta serena is to be apprehended.

The treatment must depend on the length of time the inflammation has continued, and the present state of the body; and if it will bear evacuations, we must proceed accordingly by bleeding, purging, &c. at all times place a seaton in the neck, especially if the patient complains of motes flying before his eyes; on the contrary, if the system be debilitated, I would adopt a tonic plan. In all cases it is necessary to wear a green shade until the eyes have fully recovered their strength, which they seldom do for a length of time, and they are also very liable to a fresh attack.

CASE I.

*Where Bleeding did not prevent the
Iris from Protruding.*

JOHN ROLINSON, Q. M. of H. M. S. La Tigre, came into the hospital May 26, 1801, complained of his eyes three days before, with swelling of the internal part of the lids, great inflammation, body regular. The cold bathing was used liberally, and in the morning of the 27th he was much relieved; but in the evening, the pain and inflammation encreased to a violent degree, with a sensation of his eyes bursting out of their orbits, the whole of the tunica adnata red. Goulard was continually applied to the surrounding parts, two grains of opium given internally, and blisters behind the ears. On the 28th he was apparently much relieved, but fearing another dreadful relapse, I took 10 ounces of blood from the arm. On the 29th he was much better, and the application was continued 'till the 31st, when the eyes again were inflamed; the blisters and bleeding were renewed, but he returned the goulard, finding more ease from cold water. June 4, near well; June 6, inflammation again encreased; June 7, blistered the nape of the neck; June 8, again relieved, but appeared debilitated; on the 9th washed the eyes with brandy and water; on the 11th, the wash continued, and his eyes clearing, on the 13th, could

could work with his needle, but on the 14th a small speck appeared in both eyes, to which was applied a small portion of powdered sugar, and continued to the 17th, when a small blueish tumour appeared at the bottom of the transparent cornea, evidently containing a small portion of the iris, as its circular form was destroyed; this was carefully opened, and calomel blown into it. The next day another appeared on the left eye, which had the same treatment; on the 19th and 20th calomel continued, the pupil was a little elongated; on the 21st he returned to duty.—N. B. His sight was rather weak in the day time, but in the night he expressed some surprise that he could see so much better than before; on the 19th I was obliged by the disease to leave the hospital, and did not see him 'till about 8 or 10 days after, and the pupil had nearly gained its circular form; I sent him on board for the benefit of the shade and cool air, and he perfectly recovered.

CASE II.

THOMAS YOUNG, Q. M. of H. M. S. *La Tigre*, came into the hospital tents about the same time as Rolinson; vision extremely painful, body regular, cold bathing applied continually; on May 29, the symptoms encreased as in the above case, but far more violent; blisters to the temples and behind the ears, and 12 oz. of blood taken from the arm, also a grain of opium every 5 or 6 hours if required.

required. On the 28th, inflammation not abated, applied goulard; on the 29th he returned it, declaring he found more benefit from the cold water only, since the bleeding, his countenance extremely pale, and the whole frame much debilitated; the eyes were scarrified, and the warm bath used to encourage the hemorrhage; on the 30th I succeeded in dividing the angular arteries; June 5, the vision nearly free from pain, washed with weak brandy and water, and gave him the diluted vitriolic acid twice a day; on the 13th he returned to duty.—N. B. The debility and pale countenance continued for a long time, nor did he perfectly recover until some months after he returned on board.

CASE III.

Rupture of the Transparent Cornea from a Blow.

GEORGE WILLIAMS, aged 31, H. M. S. Ajax, came into the hospital tents, May 24, 1861, had been affected four days; he was immediately blistered, and goulard applied to the eyes, but on the 30th, he preferred cold water; in the night had all the horrid symptoms as already mentioned. June 1, complained of great pain, divided the angular arteries; on the 2d, much relieved; on the 4th, cold bath continued; in his sleep this night he unfortunately

fortunately received a flight blow on the left eye, which burst, and the aqueous humour discharged with violent pain ; cloths dipt in a solution of laudanum kept continually on the eye and surrounding parts, and the body opened ; on the 6th, great pain, opened the temporal artery; on the 7th, rather more easy, laudanum continued ; on the 8th, blisters renewed, and the same treatment continued to the 12th, when a small speck appeared in the transparent cornea of the other eye ; on the 13th, it encreased ; on the 14th, opened it ; on the 15th, body costive, sal cathart, 1 oz. 17th, another small blister arose on the part which was opened, and calomel blown in, the former wound healed. About this time my own eyes became affected, and I was obliged to leave him—he was sent on board June 27, nor have I heard of him since.

CASE IV.

Another Rupture from Accident.

PHILIP WOODLAND, H. M. S. Ajax, came to the hospital tent, May 22, 1801, and was treated according to the general mode of practice, by cold baths, blisters, &c. June 6, a blister arose on the transparent cornea ; on the 8th, it broke with great pain, and the aqueous humour was thrown to some distance ; fomentations of laudanum were immediately

ately applied ; on the 9th, in lying down, he slightly struck his eye on the toe of another man, by which the whole was ruptured, the iris protruding, and the internal parts full of blood ; the eye was unluckily lost, the inflammation soon abated, and he returned to duty in a few days.

CASE V.

The good Effects of Calomel in removing Opacity.

SAMUEL BARNSWELL, H. M. S. Kent, came into the hospital June 2, 1801, he was immediately blistered behind the ears, and cold baths continually applied, with opiates at night ; on the 7th, he was much relieved ; on the 8th, blisters repeated ; on the 9th, in the evening, I observed a small speck in the left eye ; on the 10th, highly inflamed, poulticed with goulard, and his body opened ; on the 12th, divided the angular arteries, and encouraged the bleeding by warm fomentations ; on the 15th, much the same, blisters repeated, and a large one on the nape of the neck ; at night, calomel, gr. x. opii, gr. i. on the 16th, pulv : jalapii 3fs, scarified the whole of the inflamed part ; on the 17th, the eye still inflamed, but could bear the light better ; on the 18th, inflammation abating—from this time I did not see him
for

for 8 or 10 days, owing to my own illness, and then found him with a large thick white substance nearly covering the whole of the transparent cornea, giving me very little hopes of saving the eye; however with a lancet I made a small puncture, and with the edge carefully raised some of it, and through a quill blew in calomel two or three times a day, although the vessels continued red, in three or four days I found the eye became bright, and thus continuing gradually till on the 15th of July, a very small portion was left, the pupil clear, and vision perfect; July 20, he returned to duty, having only a small speck about the the size of a small pin's-head under the sight, which I have no doubt would disappear; he had calomel with him to use if required.

CASE VI.

When the Disease took place by Accident, from syringing others' eyes.

JOHN WHITE, Seaman, H. M. S. La Tigre, came to the hospital tents June 14, with Ophthalmia, and by the usual treatment, he soon perfectly recovered. When returned from on board, I found him one of the orderlies, from the excruciating pain I felt in having the matter picked out by means of a probe and cloth, I resolved to try the effects of syringing them with warm water, as in the first instance it would wash out any extraneous matter, and at
the

the same time act as a fomentation, I therefore had them syringed twice a day. This man having been extremely careful and attentive, offered his services to attend them. The second day, using too much force, a part of the injection out of the diseased eye flew into his—of course a small portion of matter blended with it; he immediately complained of a smarting pain, but took no further notice of it till the evening; he then complained of soreness. The next day his eyes inflamed, and he had the disease equally as bad as when he came into the hospital.—Another orderly, of the name of Taylor, belonging to the Northumberland, took the charge of them; he in like manner in a few days got some matter in his eyes; complained of the same smarting, and the next day the disease took place, but soon recovered by syringing with warm water. These men after they recovered, again took charge of the blind, and from this mode of treatment they recovered much sooner than before, and many who made early application, continued only a few days on the sick list.

To give all the cases that occurred, would swell this pamphlet to a larger size than at present I wish; but it is my intention, when time will permit, to revise the whole, and publish them with the other diseases, as they came into the hospital, with their symptoms and treatment; but shall now conclude
with

with a general view of the diseases from opening the hospital at Rosetta, until I was obliged to leave the lines for the safety of my sight.

The surrounding situation of Alexandria, I have justly drawn, but Rosetta, situated on the banks of the Nile, is an amazing contrast, covered with luxurious verdure, where fruit, vegetables, &c. &c. could be at all times procured at a moderate expence; rendered it one of the first objects to those who had the welfare of the sick and wounded continually on their minds; it was embraced immediately, especially when it was known there were between 20 or 30 sick seamen in open boats on the Lake Etoko. The late French hospital was taken by Sir S. S. on the same terms they had it, after being well cleaned, and all the old beds burnt in the public square; date cradles and mats were procured for them to lay on, and strict orders given that they should want for nothing that could be obtained, and the different Captains of the brigade were desired to send their sick by boats to this place.

A part of one of the diet tables I shall lay before you, first observing, that full allowance was, meat 1lb. bread, 1lb. wine, 1 pint; milk in the morning and evening; with vegetables.

Half diet was, meat, $\frac{1}{2}$ lb. bread, $\frac{1}{2}$ lb. wine $\frac{1}{2}$ pint, milk as before.

Low diet was, soup, 1 pint; bread $\frac{1}{2}$ lb. no wine; milk if the stomach would bear it.

DIET LIST.												
Rosetta Hospital, May 9, 1801.												
Men's Names.	Full	Half	Low	Milk	Eggs	Whey	Rice	Lemons	Sago	Coffee	Wine	Extra's.
Talare	1			1							1 1/2	
Short		1		1				2				
J. Napoli			1	1								
A Turk			1	1								
&c.				1								
								2				
										1		
											1 1/2	
												1/2 a Fowl

You may now justly observe, why was not this continued? the truth is, all did not approve of it; the objection was, its distance from Alexandria.—— Was there no conveyance? yes, plenty. Then what

By this we find only five with Ophthalmia, and those extremely slight; our principal diseases were dysenteries and fevers; these were brought on by excessive fatigue, and continually living in open boats, exposed to the sun by day, and heavy cold dews at night, which it was impossible to avoid; and what still added to it, was the shameful delivery to the men of date brandy, instead of good rum or wine.

A General Return of the Sick, belonging to the Brigade
of Seamen in the Hospital Tents near Alexandria,
from May 26, to June 18, 1801.

Ships Names	Total	Fevers	Dysenteries	Opthalmia	Pulmonic	Leprosy	Returned to duty	Died	Left in the Hospital under Cure.						
									No.	Fevers	Dysent.	Opthal.	Pulmo.	Leprosy	
Le Tigre	19		12	6			16		3		3				Sent on Board June 1, under failing or- ders for England
Swiftsure	7	3	3	1					6	2	1	2	1		
Kent	9	2	3	3	1		3		5	1	1	3			
Northumberland	14	2	8	9			7	1	2	1	1	1			
Minotaur	12	2	5	5			10		2	1		1			
Foudroyant	30	3	3	24			21		8	1	2	5			
Ajax	22	1		21			14		7	1		6			
Gun-Boats	113	13	29	69	2	1	71	1	31	6	7	17	1	1	
	17	5	8	1	2	1	6		11	4	4	1	1	1	
Total	130	18	37	70	4	1	77	1	42	10	11	18	2	1	

Here we find, from May 26, to June 18, seventy had been afflicted with the Ophthalmia.

There was every thing necessary provided for them as our situation would admit, except bedding, and surely it would be a trifling expence to Government, if in every large fleet one good hospital tent, with beds, &c. was in store for such emergency as this, which every regiment has, thereby rendering their men comfortable to what the sailors were. I here return thanks to Mr. Green (Inspector of Hospitals) for his attention to sick seamen; whatever lay in that gentleman's power was given with a pleasure that marked the goodness of his heart. When I became a victim to this scourge of our army, the surgeon of the 54th, and Mr. M'Auley of the Marines, handsomely came forward to attend the hospital, while I went on board the *Toride* for the sake of coolness and shade, to restore my sight which was in imminent danger: The Marine Hospital was close to ours, and the sick were hourly under their immediate inspection; but some busy person sent word to Lord Keith, a glaring falsehood, that there was no one to attend the sick of the brigade; and when I returned to the Lines (before my eyes were well) I found I was superceded. This gentleman was sickly, I attended for him till he was promoted, the charge again fell on me till the whole was ordered

dered on board. From that time, I volunteered in the gun-boats on the new Lake, as they were going into action, from which I was sent in the Charon, to Malta, with the wounded to the hospital.* From the time of my blindness, to this, I served without pay, my vessel, La Negresse, being destroyed in bombarding the Castle of Aboukir. My journal was interrupted, in which I had invariably, from landing, entered every person's name, disease, symptoms, medicines, &c. which I now peruse with pleasure.

* When we arrived, I was sent into the Lazaretto with the sick and wounded. It was with the greatest difficulty I could keep them in order, or prevent some of the strongest attempting to swim to Valette. Owing to shameful neglect in some department, we were near four days with only $\frac{1}{4}$ of a loaf each man, and that the last day. I need not point out the situation of the poor sailors and prisoners. The following is nearly a copy of a letter I wrote to the Governor, which was immediately attended to, as we got product. Those that were with me belonging to the army, had good victuals regularly sent them; but the poor Sailors were languishing for want of food.

MAY IT PLEASE YOUR EXCELLENCY,

IT is now near Four Days since I, and Forty-Nine Sick and Wounded Sailors, with Eight Wounded French Prisoners, were landed at the Lazaretto, since which Time we have had only Three Quarters of a loaf each Man. I have several with the Scurvy, Wounds, bad Ulcers, and without Limbs; and for want of necessary Refreshment, they are sinking. To you I apply for Relief for these poor Fellows who have suffered for their Country; it is to you, Sir, I look up for help, which if not speedy, will in a few Days terminate fatally.

I remain,

Your Excellency's

most obedient humble Servant,

F. B. SPILSBURY.

A List of those Afflicted with Ophthalmia, in the Hospital Tents, from May 21, to June 18, 1801.

Ships Names	Men's Names	Time when entered Hosp.	Discharged to Duty	Left in Hosp. under Cure	Remarks
Foudroyant	Chas. Oats	May 28	June 16	June 18	
	Wm. Henwood	ditto	ditto 2		
	Wm. Dawson	ditto	ditto 4		
	John Cray	ditto	ditto 5		
	James Coile	ditto	ditto 4		
	Wm. Pratt	ditto	ditto		
	John Abbot	ditto 29	ditto 5		
	John Bone	ditto	ditto		
	Patrick Orm	ditto 30	ditto 11		
	J. Grittery	ditto			
	Ed. Dodds	ditto	ditto 16		
	Sam. Jackson	ditto 31	ditto 4		
	John Beverige	June 1	ditto 16		
	Rt. Letham	ditto 2	ditto 10		
	Wm. Butler	ditto 4	ditto 12		
	Henry Walter	ditto 5	ditto 18		
	Ed. Williams	ditto 8	ditto 17		
	John Briant	ditto	ditto 18		
	P. de Val	ditto			
	J. Rogan	ditto 10	ditto		
John Trimbull	ditto	ditto			
Mr. Alexander	ditto 12	ditto			
A. W. Hunter	ditto 17	ditto			
Le Tigre	John Robinson	May 26		June 18	
	James Young	ditto	ditto 13		
	D. Light	ditto	ditto		
	John Pike	ditto	ditto 4		
	Henry Fox	ditto	ditto 8		
	John Leo	ditto	ditto 9		
Swiftsure Kent	Wm. Robinson	May 29			Sent on board
	Sam. Barnswell	June 2		June 18	
	James Doyle	ditto 7		ditto	
	John Shaw	ditto		ditto	
Northumberland	Walter Langford	May 18		June 18	
	Patrick Dunn	ditto 29	June 12		
	Patrick Driskil	ditto 30		ditto	
	S. Fox	June 1		ditto	

Ships Names	Men's Names	Time when entered Hosp.	Discharged to Duty	Left in Hosp. under Cure	Remarks
Minotaur	John Finney	June 1	June 8		
	James Wilson	ditto 4		June 18	
	J. Beavy	ditto		ditto	
	E. Jackson	ditto 5		ditto	
	D. Jones	ditto		ditto	
	G. Stoakes	May 29	June 17		
	John Brian	June 2	ditto 12		
Ajax	W. Wood	ditto	ditto 5		
	Steph. Rowe	ditto	ditto 12		
	J. Davis	ditto 4	ditto 30		
	John Potts	May 29		June 18	
	R. Cuttle	ditto	June 17	ditto	
	W. Heart	ditto		ditto	
	G. Williams	ditto		ditto	
	P. Woodland	ditto			
	M. Coy	ditto 30	ditto 7		
	W. Bradford	June 2	ditto 9		
	H. Martin	ditto	ditto 11		
	T. Copperwit	ditto	ditto 8		
	R. Wilmot	ditto	ditto		
	W. Tyson	ditto	ditto 17		
	R. Duglafs	ditto	ditto 7		
	T. Grey	ditto			Sent on board June 12
	J. Marvin	ditto	ditto 8		
	J. White	ditto	ditto		
	W. Strongman	ditto 8	ditto 12		
	J. Shorter	ditto		ditto	
	T. Coates	ditto	ditto 18		
	J. Wright	ditto	ditto		
	J. Strickland	ditto	ditto 11		

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